

# LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

## Instructions

- Print in ink or type.
- Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

## FOR OFFICE USE ONLY

Postmark Date: 01/26/02

Ren. 2002

# 26078

\$110.0000

1060238

1. NAME Cormier Maxime \_\_\_\_\_  
Last First MI

2. BUSINESSPHONE (225) 761-5007 \_\_\_\_\_  
Area Code and Phone Number

3. BUSINESS ADDRESS P. O. Box 4625 Baton Rouge, LA 70821 \_\_\_\_\_  
Street and No. City State Zip

MAILING ADDRESS (same) \_\_\_\_\_  
Street and No. City State Zip

4. EMPLOYER Self-employed \_\_\_\_\_

5. EMPLOYER'S ADDRESS N/A \_\_\_\_\_  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Louisiana Trial Lawyers Association ✓

Address 442 Europe St., Baton Rouge, LA 70802

Business or purpose Voluntary bar association

Does this person pay you? Yes

If No, who pays you? \_\_\_\_\_

HAND DELIVERED

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2. Name Association for Clinical Social Work ✓

Address 5329 Diton Dr. Ste. 105, Baton Rouge, LA 70808

Business or purpose social workers association

Does this person pay you? Yes

If No, who pays you? \_\_\_\_\_

3. Name Entergy Corporation, Baton Rouge ✓

Address P.O. Box 2431, Baton Rouge, LA 70821

Business or purpose energy entity

Does this person pay you? Yes

If No, who pays you? \_\_\_\_\_

4. Name Louisiana Hospital Association ✓

Address 9521 Brookline Ave., Baton Rouge, LA 70809

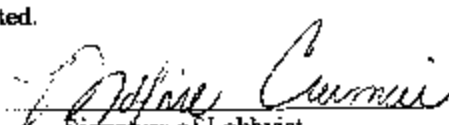
Business or purpose association of hospitals

Does this person pay you? Yes

If No, who pays you? \_\_\_\_\_

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

  
Signature of Lobbyist

ATTACH  
2" x 2"  
PHOTOGRAPH  
HERE

# LOBBYING REGISTRATION FORM



5. Name The Alchemind Group

Address 5517 Moss Side Lane, Baton Rouge, LA 70808

Business or purpose Association concerned with progressive politics

Does this person pay you? Yes

If No, who pays you? \_\_\_\_\_

6. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

7. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

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